

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23460 7590 06/23/2005

LEYDIG VOIT & MAYER, LTD  
TWO PRUDENTIAL PLAZA, SUITE 4900  
180 NORTH STETSON AVENUE  
CHICAGO, IL 60601-6780

08/29/2005 MBELETE2 00000008 500463 09629234

01 FC:1501 1400.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

<i>Nirmal Tawal</i>	(Depositor's name)
<i>[Signature]</i>	(Signature)
8-24-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/629,234	07/31/2000	Syon Bhattacharya		4012

TITLE OF INVENTION: DYNAMIC RECONFIGURATION OF MULTIMEDIA STREAM PROCESSING MODULES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	09/23/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
HO, ANDY	2194	709-315000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. MICROSOFT CORPORATION  
2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MICROSOFT CORPORATION

REDMOND, WA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0463 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date August 24, 2005

Typed or printed name

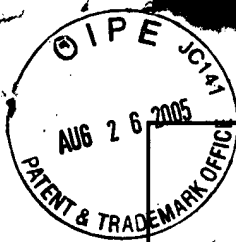
Steven J. Spellman

Registration No.

45,124

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

☐ Sent via Express Mail  
Label No.:

Application Number	09/629,234
Filing Date	July 31, 2000
First Named Inventor	Syon Bhattacharya
Group Art Unit	2194
Examiner Name	Andy Ho
Attorney Docket Number	141415.01

## ENCLOSURES (check all that apply)

- ☐ Fee Transmittal Form  
☐ Fee Attached
- ☐ Amendment / Reply  
☐ After Final  
☐ Affidavits/declaration(s)

- ☐ Extension of Time Request
- ☐ Express Abandonment Request

- ☐ Information Disclosure Statement with  
Form PTO/SB/08A ( pages)
- ☐ Response to Notice to File Missing Parts  
☐ A copy of the Notice to File Missing  
Parts Under 37 CFR 1.52 or 1.5

### CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.9(a))

I hereby certify that this correspondence is being:

☒ deposited with the United States Postal  
Service on the date shown below with sufficient  
postage as first class mail in an envelope addressed to:  
Mail Stop Issue Fee, Commissioner for Patents, P.O.  
Box 1450, Alexandria, VA 22313-1450; or

☐ transmitted by facsimile on the date shown below  
to the USPTO at (703) \_\_\_\_\_

August 24, 2005

Date

Signature

Steven Spellman

Printed Name

- ☐ Assignment Papers  
(for an Application)
- ☐ Drawing(s) ( sheets)
- ☐ Declaration and Power of Attorney  
☐ Newly Executed ( pages)  
☐ A copy from a prior application  
(37 CFR 1.63(d)) ( pages)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional  
Application

- ☒ General Power of Attorney (SB80)  
☒ 37 CFR 3.73(b) Statement

- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) \_\_\_\_\_

- ☐ After Allowance Communication to TC
- ☐ Appeal Communication to Board of  
Appeals and Interferences

- ☐ Appeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

- ☐ Proprietary Information

- ☐ Status Letter

- ☐ Application Data Sheet

- ☐ Request for Corrected Filing Receipt

- ☒ Return Receipt Postcard

- ☒ Other Enclosure(s) (please identify  
below):

1.) Issue Fee Transmittal

2.) Copy of this Transmittal Form

Remarks ☒ The Commissioner is hereby authorized to charge any additional  
fees required, or credit any overpayments, to Deposit Account No. 50-  
0463 for the above identified patent application.

## SIGNATURE OF ATTORNEY OR AGENT

Signature		Reg. No.	45,124
Name of Attorney or Agent	Steven Spellman		
Date	August 24, 2005	Tel.	(425) 707-9382
		Facsimile No.	(425) 708-5046

Assignee Name: MICROSOFT CORPORATION  
ONE MICROSOFT WAY  
REDMOND, WA 98052

Customer Number: 22971